2013

Employee Benefits Information

& OPEN ENROLLMENT GUIDE



Dear Placer County Employees,

We are pleased to provide you with the 2013 employee benefits information and Open Enrollment Guide for eligible employees. The choices we make concerning our benefits are among the most important we select for ourselves and our families. As part of your total compensation package, Placer County offers you a comprehensive benefits package that includes various options to meet your health care needs.

During our annual benefits open enrollment period, Monday, September 10, 2012 through Friday, October 5, 2012 you have the opportunity to review and, if necessary, change your health benefits to meet your current needs. During this period, you may elect, change, or waive coverage in a health care plan, dental plan, and/or vision care plan. You also have the opportunity to change your supplemental life insurance and Accidental Death & Dismemberment (AD&D) coverage, as well as elect voluntary Employee Paid Long Term Disability Insurance. In addition, you may enroll or re-enroll in a dependent care reimbursement account. For more information on individual plan eligibility, please see the enrollment criteria in this guide for each plan offered.

Please Note: There is no automatic enrollment each year for your FBMC Flexible Spending Account. You must actively make an election to enroll every year.

Simplifying The Changes

We have highlighted the changes to the various health plans in the section titled "What's New?". Employees may review current benefit elections, covered dependents, and beneficiaries; preview benefit costs; and make benefit elections online in ACORN eBenefits. Please review page 4 of this guide for instructions on accessing and enrolling in ACORN eBenefits. If you do not have access to a computer at work, you may use any county workstation that has County-wide access, or you can use a computer kiosk in the Personnel Department at 145 Fulweiler Ave., Suite 200, Auburn between 8:00 a.m. and 5:00 p.m. Monday through Friday.

CalPERS Health Plan Chooser

A great resource for choosing or comparing health plans is the CalPERS Health Plan Chooser at www.CalPERS.ca.gov. This website allows you to view the majority of the CalPERS health plan information in one place, compare plans side-by-side and rank each plan based upon your personal preference.

Verifying Dependent Eligibility

You must provide dependent documentation for each dependent that you are adding to your medical, dental, or vision care coverage during Open Enrollment. The required documentation (CalPERS requires a birth certificate AND social security number, and marriage certificate or domestic partner registration, if applicable) must be provided to Personnel no later than **October 5, 2012**. If we are unable to verify your dependent's eligibility, your dependent will not be covered as of January 1, 2013. Please note that if your dependent has been verified previously, no further action is required.

Qualifying Life Event

If you have a qualifying life event during the 2013 plan year, you must submit the required documentation within thirty (30) days of the qualifying event. Please see page 9 for more information on qualifying events.

Attending the Benefits Fair

If you have questions that you would like to discuss directly with Personnel staff or one of our benefits providers, we invite you to attend our Benefits Fair on Wednesday, September 19 from 11:00 a.m. to 2:00 p.m. at the Auburn Justice Center Community Room. At the Benefits Fair you will have the opportunity to talk with representatives from Personnel, our health care providers, and Hartford and CalPERS deferred compensation carriers.

Personnel Staff will also be available from 10:00 a.m. to 2:00 p.m. on Tuesday, September 25 in Tahoe City at the Tahoe Administration Building, 775 North Lake Boulevard, and Wednesday, September 26 from 9:00 a.m. to 2:00 p.m. in Rocklin at the Santucci Center, 10810 Justice Center Drive.

If you have any questions, please contact the Open Enrollment Hotline at 530.889.4089.

Thank you, Placer County Personnel

Table of Contents

What's new?	2
Open Enrollment Period	3
ACORN eBenefits	4
Frequently Asked Questions	5-6
Benefit Eligibility Enrollment Criteria	7-8
Qualified Life Event Changes Outside of Open Enrollment	9
In Lieu of Health (ILH) Plan	10
CalPERS Rates	11
Dental Insurance	12
Vision Insurance	13
Accidental Death & Dismemberment (AD&D)	14
Supplemental Term Life Insurance	15
Long Term Disability (LTD) Insurance	16
Dependent Care Flexible Spending Account (FSA)	17-18
PPEO Cafeteria Plan	19
Deferred Compensation	20
Concern:EAP	2I-22
Troubleshooting	23
Payroll Calendar	24
Health Insurance Portability & Accountability Act (HIPAA)	25
Current Provider Information	26
Notes	27

What's New?

The following are general health plan changes and Open Enrollment highlights for 2013. For additional changes specific to your plan, refer to the Evidence of Coverage (EOC) booklet on your plan's website, or CalPERS online at www.CalPERS.ca.gov.

PPEO Cafeteria Plan

- Effective December 15, 2012, (pay date January 11, 2013) Placer County will contribute for each PPEO represented employee the following funds for use in a Cafeteria Plan:
 - CalPERS Miscellaneous Members: 6% biweekly contribution of the employee's base salary plus longevity.
 - CalPERS Safety Members: 5% biweekly contribution of the employee's base salary plus longevity.
- Employees may elect to use Cafeteria Plan funds for Dependent Care reimbursement, 401(k) contribution, a cash option, or any combination of these three.
- Additional details regarding this new offering are contained in this guide on page 19.
- If you do not make an election in ACORN, you will receive the cafeteria plan as cash only.

PERS Select (Basic & Medicare)

- Expanding service area to include Alameda, Placer, and Solano counties.
- With this expansion, PERS Select/Choice/Care will cover every county in California.

Voluntary LTD Election Offered in 2013

• Voluntary LTD is open to employees with less than five years of service. See page 16 for details.

Forms

• All required forms are available on the iPlacer Personnel Department page under Benefit Forms and Documents. For a breakdown of what forms to submit, please see page 8 of this guide.

Open Enrollment Period

Open Enrollment begins at 8:00 a.m. on Monday, September 10 and ends at 5:00 p.m. Friday, October 5, 2012.

During this period, eligible employees may:

- Enroll in a medical, dental or vision plan, if you are eligible and you currently do not have medical, dental or vision benefits
- Change your medical plan
- Add or drop dependents for medical, dental or vision coverage
- Enroll in the 2013 Dependent Care spending account

Additionally, it is a good time to:

- Review or amend your life insurance beneficiaries, and make sure only eligible dependents are covered by your insurance plans. See Page 7 for the list of eligible dependents.
- Review your deferred compensation plan contributions, investment options and beneficiaries

When enrolling in plans, remember:

- All benefit changes made during Open Enrollment will be effective January 1, 2013
- If you do not make any changes during the Open Enrollment period (with the exception of FBMC Flexible Spending Accounts, which require enrollment every plan year) your current plan elections will remain in effect for calendar year 2013.
- The Dependent Care spending account requires re-enrollment every plan year
- Employees who add their spouse or Registered Domestic Partner and/or dependent child(ren) on their medical, dental or vision plan must submit a birth certificate and social security number for each dependent added and a marriage certificate or domestic partner registration verifying dependent eligibility

ACORN eBenefits

Making changes to your benefits online

You can log on to ACORN eBenefits as often as you wish from Monday, September 10, through Friday, October 5, to review and/or make changes to your 2013 Open Enrollment elections.

If you do not have access to a County computer, you can use any County workstation that has countywide access. Please see your department personnel representative for assistance.

You can also use the computer kiosk in the Personnel Department:

145 Fulweiler Ave, Suite 200, Auburn between 8:00 a.m. and 5:00 p.m. Monday through Friday

Use your web browser (Internet Explorer) to access ACORN eBenefits. Type "acorn" (without the quotes) in the browser address bar and press the Enter key. You will be automatically logged into ACORN. You can also find a link to ACORN from the iPlacer home page.

For most employees, a user ID and password are NOT required. If you are prompted for a user ID/password, please email ACORNHelp@placer.ca.gov for assistance.

Once you have logged into ACORN:

• Select 'Main Menu', then 'Self Service' then 'Benefits', then 'Benefits Enrollment'

When you click on 'Select' to the right of the Open Enrollment Event Description, you will be able to view your current elections for 2012

Click on the 'Edit' button next to the insurance benefit you will be reviewing and/or changing

Please review each of your benefit options carefully. If you are adding a dependent to your coverage, you must provide the required documentation to the Personnel Department no later than October 5, 2012. If we are unable to verify your dependent's eligibility, your dependent will not be covered as of January 1, 2013. Please note that if your dependent has been verified previously, no further action is required.

Before finalizing your changes, review your selections carefully to ensure that everything is correct and accurate - including the plans, dependents covered, and/or your life insurance beneficiaries.

When you are ready to finalize your changes, click the 'Submit' button. This will bring you to the 'Submit Confirmation' page. Here you will be directed to click on a second Submit button to authorize your elections.

Your changes will not be finalized until you have clicked the final 'Submit' button.

If you need assistance with eBenefits, leave a message on the Open Enrollment Hotline at 530.889.4089.

Frequently Asked Questions

General

Q: When will the changes I made to my benefits take effect?

- A: As long as all requirements are satisfied, your coverage changes will take effect on January, 1, 2013.
- Q: How do I make changes to my benefits?
- A: Through ACORN eBenefits. See Page 4 for instructions.
- Q: When will premiums for 2013 changes come out of my paycheck?
- A: <u>Pay Period 12 (Pay Date 12/14/2012)</u> Health, LTD, ILH - 401(k)

Pay Period 14 (Pay Date 01/11/2013)

Flexible Spending Accounts, Employee 401(k) & 457, Cafeteria 401(k)

Pay Period 15 (Pay Date 01/25/2013)

Dental, Vision, AD&D, Life Insurance

Premiums for Supplemental Life Insurance are effective upon acceptance and approval by the insurance carrier.

Q: Can I keep my ex-spouse on my benefits?

A: No, CalPERS considers ex-spouses to be 'ineligible dependents' and it is against both CalPERS and Placer County policy for an employee's ex-spouse to remain covered on their insurance. Failing to remove your ex-spouse may subject you to reimburse all costs associated with the medical care services for your ex-spouse and ineligible dependents.

Q: Where can I get the forms I need to make new elections or plan changes?

A: All necessary forms are available on the iPlacer Personnel Department page under 'Benefit Forms and Documents'. For a break-down of what forms to submit, refer to page 8 of this guide.

Q: Do I have to complete a new Declaration of Health Form if I do not make any changes?

A: No, you do not. If you don't make any changes to your benefits, you do not need to submit any forms. You will continue to be enrolled with the same benefits you had for 2012. However, it is recommended you review your current plan, coverage levels, dependents and beneficiaries in ACORN eBenefits during the Open Enrollment period.

Please note that while the changes are recorded in ACORN, you still must submit any required documents to the Personnel Department.

Frequently Asked Questions

Q: I reviewed and made changes in ACORN, but how do I know if they updated?

A: Your changes will not appear in ACORN until AFTER Open Enrollment closes on October 5 and has been validated and finalized. An e-mail will be sent letting employees know that their benefits are available for review.

Health Plans

Q: What is the difference between a HMO and a PPO?

A: Traditional HMO plans (Blue Shield Access + and Net Value, Kaiser Permanente) generally pay 100% of the cost of care after a co-payment, but require you to use in-network providers (i.e., a physician or hospital), and have your care coordinated through your Primary Care Physician. Except in the case of emergencies, coverage is not provided for non-network providers or for services not authorized by the plan.

Traditional PPO plans (PERS-Select, PERSCare, PERS-Choice, PORAC) generally pay a percentage of the cost of care after a co-pay and deductible; the remaining amount is paid by the participant. The services of in-network providers are paid at a higher percentage than the service of out-of-network providers. Generally PPO plans offer more flexibility on provider choice and services. Because of the higher cost of using providers out of network, the premium cost is higher as well.

Do you have an Open Enrollment or health benefits question not mentioned above? Leave a message on the Open Enrollment Hotline at 530.889.4089.

Benefit Eligibility Enrollment Criteria

Eligible Dependents

The terms 'family members' and 'dependents' are used interchangeably. The following dependents of an enrolled employee are eligible for health insurance:

- · Legal spouse
- Qualified Registered Domestic Partner (requires the completing and submitting of registration forms)
- Children up to the age 26 for all CalPERS health plans (23 for all other plans)
- Disabled children beyond age 26 who are unmarried, incapable of sustaining employment due to a physical or mental handicap that existed prior to child's attainment of age 19. The disabled adult dependent must meet the disabled dependent requirements as defined by the health insurance carrier

The definition of a dependent child includes natural child, step-child, adopted child, and children of a registered domestic partner.

Ineligible Dependents

Ineligible dependents include:

- Former spouse/registered domestic partner, even if you have a court order requiring you to provide health insurance coverage
- Children age 26 or older for health insurance and 23 years or older for all other benefits.
- Disabled children over age 26 who were never enrolled or who were deleted from coverage
- Foster children
- Children of a former spouse/registered domestic partner, including former stepchildren, even if you are required to provide health insurance coverage as dictated under a court order
- Extended family members, including mother, father, siblings, grandparents, in-laws, etc. under any circumstances

You must submit a copy of your final divorce decree or Notice of Termination of Domestic Partnership Form to the Personnel Department within 14 days of the event if you are an active employee or to CalPERS if you are a retiree. Former spouses and registered domestic partners may be eligible for COBRA or an individual conversion policy.

Dependent Eligibility Verification Process

You must provide dependent verification documentation for each dependent you are adding to your benefits coverage. The required documentation must be provided no later than October 5, 2012. If we are unable to verify your dependent's eligibility, your dependent will not be covered as of January 1, 2013. Please note that if your dependent has been verified previously, no further action is required.

The following chart is an easy guide to which forms and documents must be submitted. The chart does not include all possibilities and should be used in conjunction with the CalPERS Health Enrollment Form.

For further clarification, leave a message on the Open Enrollment Hotline at 530.889.4089.

NOTE: It is against
CalPERS and Placer
County policy for an
employee to enroll
ineligible persons as
dependents; to do so
may subject the employee
to reimbursement costs
for all costs associated
with the delivery of
medical care services to
the ineligible person.

Benefit Eligibility Enrollment Criteria

Forms can be found on the iPlacer Personnel Department page under 'Benefits Forms and Documents'. All forms and documents must be submitted to Personnel by the end of Open Enrollment at 5:00 p.m. on Friday, October 5, 2012.

TYPE OF CHANGE	INFORMATION/FORMS REQUIRED
ANY CHANGES TO HEALTH PLAN	Declaration of Health Coverage
ADD SPOUSE/ DOMESTIC PARTNER (DP)	Full Name/ SSN/ DOB/ Domestic Partner Registration Or Marriage Certificate
IN LIEU OF HEALTH COVERAGE (ILH)	Verification of Other Health Coverage, Enrollment Form for 401(K) and Declaration of Health Coverage Form
ADD CHILD/ STEP-CHILD/ DEPENDENT CHILDREN	Full Name/ Social Security Number and Copy of Birth Certificate Must Be Provided/ DOB
PARENT-CHILD RELATIONSHIP	Full Name/ Social Security Number and Copy of Birth Certificate Must be Provided/DOB/ Affidavit of Parent-Child Relationship
ENROLLMENT WITH HMO	Personal Physician Selection Form
DEPENDENT CARE	FBMC Enrollment Form
LIFE INSURANCE	Need Application/ Approval Subject to Underwriting
401(K) / 457	New Enrollment - Need CalPERS/Hartford Enrollment Form

Qualified Life Event Changes Outside of Open Enrollment

If Personnel is not notified within 30 days of your Qualified Life Event, you may be responsible for any services rendered for ineligible dependents.

You may make specific changes to your health plan based on the qualified life event, such as:

- A change in your legal marital status, including marriage, divorce, death of your spouse, registered domestic partner, or legal separation
- A change in the number of your dependents through birth, adoption, placement for adoption, or death
- Termination or commencement of employment by you, your spouse, registered domestic partner, or dependent
- A significant change in your work schedule, such as a reduction or increase in hours by you, your spouse, registered domestic partner, or eligible dependent
- A change in your residence or work site that causes you to lose access to providers in your HMO plan's network
- An unpaid leave of absence by either you or your spouse or registered domestic partner
- A change in your dependent care provider that increases the cost of dependent care

Required Forms MUST be received by the Personnel Department within 30 days of the qualifying event date. Changes in CalPERS health coverage become effective the first of the month following the date Personnel receives the completed forms; all other benefit changes are effective 30 days following the date Personnel receives the completed forms.

Federal legislation known as the Health Insurance Portability and Accountability Act (HIPAA) allows employees who lose their other health insurance coverage to enroll in a CalPERS Health Plan. Employees and their dependents may be eligible to enroll outside the Open Enrollment period but coverage may not be effective until the first of the month following a 90-day waiting period depending upon the individual circumstances.

In Lieu of Health (ILH) Plan

If you have other health insurance coverage, you may waive the Placer County health insurance and take advantage of an employer contribution to your 401(k) savings plan In Lieu of Health insurance (ILH).

401(k) contribution In Lieu of Health: \$130 per pay period To participate in the 401(k) In Lieu of Health program, you will need to:

- Enroll through ACORN eBenefits by selecting '401(k) Flex Credit Part 1, AND 401(k) ILH Part 2 savings plans. If you do not currently have a 401(k), complete and submit a 401(k) enrollment form and a beneficiary designation form
- Provide proof of other health insurance coverage (a copy of your insurance card including your name is sufficient)
- If you are not currently enrolled in a Hartford or CalPERS 401(k), enroll in ACORN and complete and submit a Deferred Compensation Enrollment Form
- Complete the Medical CalPERS Eligibility Form (Declaration of Health Coverage)

Premium Conversion

Placer County Benefit Plans operate under IRS Code Section 125 option, which allows employees to enroll and pay their share of costs with pre-tax dollars, known as "Premium Conversion." The health, dental, vision, and Accidental Death and Dismemberment (AD&D) premium are included in the Premium Conversion option. Under IRS rules, enrollment and changes to your benefit plans must be made during Open Enrollment unless there is a Family Status Change as outlined on page 9.

Please Note: your total 401(k) contribution, including the ILH amount cannot exceed the annual IRS limits of the current year. For more information, refer to the Deferred Compensation section on page 19.

2013 CalPERS Health Insurance Rates

ALL EMPLOYEES Unless Noted Below*

Effective Pay Period 12	ay Date December 14, 2012		PER PP	PER PP	CALPERS
HEALTH PLANS					TOTAL
AUBURN & TAHOE RA	ATFS	PLAN	EMPLOYEE	COUNTY	BIWEEKLY
Part-Time Rates Available on iPlace		CODE	SHARE	SHARE	COST
HEALTH MAINTENANCE OR	CANIZATIONS UMO.				
		T-0.1001		1 00 10 01	4202.00
BLUE SHIELD NET VALUE employ		BS 1231	\$60.76	\$243.06	\$303.82
BLUE SHIELD NET VALUE employ		BS 1232	\$121.53	\$486.10	\$607.63
BLUE SHIELD NET VALUE employ	yee + 2 dependents or more	BS 1233	\$157.98	\$631.94	\$789.92
BLUE SHIELD ACCESS + employe	e only	BS 1011	\$70.45	\$281.81	\$352.26
BLUE SHIELD ACCESS + employe		BS 1012	\$140.90	\$563.61	\$704.51
BLUE SHIELD ACCESS + employe		BS 1013	\$183.17	\$732.69	\$915.86
		Louis		1 1	
KAISER employee only		KN 1031	\$61.50	\$245.98	\$307.48
KAISER employee + I dependent		KN 1032	\$122.99	\$491.97	\$614.96
KAISER employee + 2 dependents	or more	KN 1033	\$159.89	\$639.55	\$799.44
PREFERRED PROVIDER OR	GANIZATIONS - PPO:				
PERS-CHOICE employee only		PCh 1051	\$62.20	\$248.82	\$311.02
PERS-CHOICE employee + I depe	endent	PCh 1052	\$124.41	\$497.63	\$622.04
PERS-CHOICE employee + 2 depe	endents or more	PCh 1053	\$161.73	\$646.92	\$808.65
PPEO employees only		•			
PERSCARE employee only		PC 1211	\$101.01	\$404.02	\$505.03
PERSCARE employee + I depende	ent	PC 1212	\$202.01	\$808.05	\$1,010.06
PERSCARE employee + 2 depende		PC 1213	\$262.62	\$1,050.46	\$1,313.08
, ,		·			
PERS-SELECT employee only		PS 1251	\$45.43	\$181.74	\$227.17
PERS-SELECT employee + I deper	ndent	PS 1252	\$90.87	\$363.48	\$454.35
PERS-SELECT employee + 2 deper		PS 1253	\$118.13	\$472.52	\$590.65
DSA employees only - capped emp					
PERSCARE employee only	,	PC 1211	\$276.18	\$228.85	\$505.03
PERSCARE employee + I depende	ent	PC 1212	\$552.37	\$457.69	\$1,010.06
PERSCARE employee + 2 depende		PC 1213	\$718.08	\$595.00	\$1,313.08
, ,					
PORAC employee only *		PORAC 2071	\$58.25	\$232.98	\$291.23
PORAC Employee + I dependent	*	PORAC 2072		\$436.29	\$545.36
PORAC Employee + 2 dependents	PORAC 2073		\$554.18	\$692.73	
*DSA, Safety Management only - if					
IN LIEU OF HEALTH				\$130.00	

Dental Insurance

Delta Dental is our plan administrator. Placer County provides dental coverage for the employee at no cost. Dependents can be added at the employee's expense. Visit the Delta Dental website at **www.deltadentalins.com** for additional provider and benefit eligibility information.

Please Note: Major treatments (crowns, bridges, dentures, etc) are excluded the first year of coverage.

Added dependents must be treatment-free ninety (90) days prior to coverage and will only be covered for routine procedures during the first year.

Placer County's Delta Dental coverage contains a 'non-duplication of coverage' clause, which means that as secondary insurance, Delta Dental will not pay any balance over the County's plan allowance.

PPEO/DSA - PER PAY PERIOD								
PPEO/DSA - annual individual	coverage: \$1,500	PPEO - lifetime orthodontia coverage: \$1,500						
		DSA - lifetime orthodontia coverage: \$2,000						
DENTAL COVERAGE 24 PAY PERIODS EMPLOYEE SHARE		COUNTY SHARE	TOTAL PREMIUM					
EMPLOYEE ONLY \$0.00		\$28.00	\$28.00					
EMPLOYEE + DEPENDENTS	\$34.00	\$28.00	\$62.00					

MANAGEMENT & CONFIDENTIAL - PER PAY PERIOD							
Management And Confidentiannual individual coverage: \$2,0		Management And Confidential - lifetime orthodontia coverage: \$2,000					
DENTAL COVERAGE 24 PAY PERIODS	EMPLOYEE SHARE	COUNTY SHARE	TOTAL PREMIUM				
EMPLOYEE ONLY	\$0.00	\$28.00	\$28.00				
EMPLOYEE + I DEPENDENT	\$19.93	\$28.00	\$47.93				
EMPLOYEE + FAMILY	\$34.00	\$28.00	\$62.00				

Vision Insurance

Vision Service Plan (VSP) is our plan administrator. Placer County provides vision coverage for employees at no cost. Dependents can be added at the employee's expense. Visit the VSP website at **www.vsp.com** for additional provider information and benefit eligibility.

VSP dependent coverage has a one year lock in/lock out period. This means that added dependents must remain on the plan for one year, and dropped dependents must remain off the plan for one year.

Please Note: If enrolling any of your eligible dependents in vision insurance, you must enroll all of your eligible dependents.

VISION - COVERAGE PER PAY PERIOD								
24 PAY PERIODS	EMPLOYEE SHARE	COUNTY SHARE	TOTAL PREMIUM					
EMPLOYEE ONLY	\$0.00	\$4.60	\$4.60					
EMPLOYEE + I DEPENDENT	\$7.10	\$4.60	\$11.70					
EMPLOYEE + FAMILY	\$12.68	\$4.60	\$17.28					

Accidental Death & Dismemberment (AD&D)

Placer County provides employees with \$10,000 Accidental Death & Dismemberment (AD&D) insurance coverage at no cost.

Additional AD&D insurance coverage is available for the employee, up to \$500,000, but cannot exceed 10 times your annual salary.

AD&D insurance is also available for your spouse or registered domestic partner, up to age 70, in amounts ranging from \$10,000 to \$300,000 (but cannot exceed your coverage amount) and for unmarried dependent children up to age 23 in amounts ranging from \$5,000 to \$25,000. One premium covers all children.

Please Note: AD&D insurance premiums are also pre-taxed.

AD&D RATES - PER PAY PERIOD								
AD&D BENEFIT LEVEL	COST FOR EMPLOYEE	COST FOR SPOUSE	COST FOR CHILDREN					
\$500,000.00	\$7.50	N/A	N/A					
\$450,000.00	\$6.75	N/A	N/A					
\$400,000.00	\$6.00	N/A	N/A					
\$350,000.00	\$5.26	N/A	N/A					
\$300,000.00	\$4.50	\$6.00	N/A					
\$250,000.00	\$3.75	\$5.01	N/A					
\$200,000.00	\$3.00	\$4.00	N/A					
\$150,000.00	\$2.26	\$3.00	N/A					
\$100,000.00	\$1.50	\$1.99	N/A					
\$75,000.00	\$1.13	\$1.50	N/A					
\$50,000.00	\$0.75	\$1.00	N/A					
\$25,000.00	\$0.38	\$0.50	\$0.50					
\$10,000.00	\$0.00	\$0.22	\$0.22					
\$5,000.00	N/A	N/A	\$0.11					

Supplemental Term Life Insurance

Placer County provides PPEO and DSA employees with a \$10,000 life insurance policy and a \$50,000 policy for Management/Confidential employees at no cost.

You can apply for additional life insurance coverage at any time, including Open Enrollment. Additional life insurance coverage is available for the employee, up to \$100,000. Life Insurance is also available for your spouse or registered domestic partner in amounts ranging from \$12,500 to \$50,000 (but cannot exceed $\frac{1}{2}$ your coverage amount) and for unmarried dependent children up to age 23 in amounts ranging from \$5,000 to \$10,000.

Electing or increasing supplemental life insurance cannot be processed through ACORN eBenefits, and requires an application, proof of medical insurability and approval by the life insurance company. You can decrease or cancel supplemental life insurance through ACORN eBenefits.

Please Note: Premiums for supplemental life insurance are effective after approval by the life insurance carrier, and are not pre-taxed.

SCHEDULE FOR EMPLOYEE OR SPOUSE - MONTHLY PREMIUM

	EMPLOYEE ONLY		SPOUSE	SPOUSE - EMF	LOYEE
COVERAGE AMOUNT	\$75,000	\$100,000	\$12,500	\$25,000	\$50,000
AGE 0-34	\$9.00	\$ 12.00	\$1.50	\$3.00	\$6.00
35-39	\$12.00	\$ 16.00	\$2.00	\$4.00	\$8.00
40-44	\$19.50	\$ 26.00	\$3.25	\$6.50	\$13,00
45-49	\$ 33.00	\$44.00	\$5.50	\$11.00	\$22.00
50-54	\$ 58.50	\$78.00	\$9.75	\$19.50	\$39.00
55-59	\$100.50	\$134.00	\$16.75	\$33.50	\$67.00
60-64	\$106.50	\$142.00	\$17.75	\$35.50	\$71.00
65-69	\$172.50	\$230.00	\$28.75	\$57.50	\$115.00
OVER 70	\$307.50	\$410.00	\$51.20	\$102.50	\$205.00

SCHEDULE FOR DEPENDENT CHILDREN - MONTHLY PREMIUM (RATE COVERS ALL CHILDREN)

COVERAGE AMOUNT	\$5,000	\$7,500	\$10,000
AGE 15 DAYS TO 23 YEARS	\$1.00	\$1.50	\$2.00

Long Term Disability (LTD) Insurance

Policy Overview

The Long Term Disability policy is offered through Lincoln Financial Group and provides income of 60% of your monthly earnings up to \$6,500 per month after you have been unable to work for one year due to illness or injury. The policy may continue to pay up to age 65 as long as you are disabled.

Placer County provides Long Term Disability Insurance at no cost to employees who have five years of active service (10,400 paid hours) and who work at least 20 hours per week. This policy takes effect automatically when you have reached 10,400 hours of active service.

Employees who have less than five years of active service (10,400 hours) and who work a minimum of 25 hours per week may purchase Long Term Disability Insurance until they reach five years (10,400 hours) of active service. Cost and future increases are based upon your earnings and age.

For policy limits and detailed information about this plan, please call Lincoln Financial Group at 800.423.2765.

Please Note: DSA represented employees are not eligible for Long Term Disability coverage.

EMPLOYEE PAID LTD RATES - PER PAY PERIOD							
CALCULATE YOUR ESTIMATED* LTD PREMIUMS AGE COST PER \$100 OF EAR							
CALCOLATE TOOK ESTIMATED. LID FREMIONS	0-29	\$.16					
(I) Your Semi-Monthly Earnings:	30-34	\$.22					
(2) Divide by 100:	35-39	\$.27					
(3) Multiply by your Age Rate:	40-44	\$.39					
= Your Estimated Semi-Monthly Premium \$	45-49	\$.54					
,	50-54	\$.74					
	55-59	\$.90					
Example:	60-64	\$1.13					
40 yr. old $$1,000 \div 100 \times .39 = 3.90	65-69	\$.84					
	70-74	\$.56					
*Earnings & Premium are based on 24 pay periods	75-99	\$.60					

Dependent Care Flexible Spending Account (FSA)

This is a plan to pay for child or elder day care expenses so you and/or your spouse can work. This plan does not cover any health-related expenses.

A Dependent Care Flexible Spending Account (FSA) allows you to set aside money, before taxes, from your paycheck to pay for eligible expenses. The advantage is that you pay no federal or state taxes on your contributions. For example, if you put in \$1,000 and are in a 20% federal tax bracket, you save \$200 ($$1,000 \times 20\% = 200).

Note: Only the custodial parent of divorced or legally separated parents can be reimbursed using the Dependent Care FSA.

Minimum Deposit: \$5 per pay period or \$130 a year

Maximum Deposit: \$192.31 per pay period or \$5,000 a year (\$2,500 if married and filing separately)

Fringe Benefit Management Company (FBMC) administers the Dependent Care FSA program. Employees save their eligible expense receipts and submit their expenses either online, by fax or mail to FBMC. You can track your reimbursements and balances on www.myfbmc.com. Direct Deposit of your reimbursement into your checking or savings account is also available.

A qualifying individual includes a **qualifying child** if they:

- Are 12 years old or younger
- · Have a specified family-type relationship to you
- Live in your household for more than half the taxable year
- Are a US citizen, national or resident of the U.S., Mexico or Canada, and
- Have not provided more than one-half of their own support during the taxable year

A qualifying individual includes a **qualifying adult dependent** if they:

- Are physically and/or mentally incapable of self-care
- Live in your household for more than half the taxable year
- Spend at least eight hours per day in your home
- Are a US citizen, national or resident of the U.S., Mexico or Canada, and
- Receive more than one-half of their support from you during the taxable year and
- Are not someone else's qualifying child

Dependent Care Flexible Spending Account (FSA)

Partial List of Eligible Expenses

- · After school care
- Baby sitting fees (must have a taxpayer ID or the babysitter's Social Security number)
- Day camps (including Summer day camps)
- · Nursery and preschool
- Daycare services
- · Care for physically or mentally impaired spouse
- Elder-care expenses
- · Household services for qualified dependent

Partial list of Ineligible Expenses

- Dancing lessons
- · Books and supplies
- Field trips
- Child support payments or child care if you are a non-custodial parent
- Overnight camp
- Swimming lessons
- · Meals for child
- Tuition for Kindergarten or higher
- Membership fees

To participate, you must enroll each year in the Dependent Care FSA and elect a new amount in ACORN.

Do not overestimate your annual contribution; you will only be reimbursed for actual expenses and any unused funds are forfeited per IRS rules. Be sure to consider the possibility of declining expenses as your child gets older. You must determine your annual contribution during this Open Enrollment period and this amount cannot be changed or adjusted unless you have a qualifying life event.

You have until March 31, 2014 to submit your claims for expenses you had during the 2013 plan year; otherwise any money left in your account will be forfeited.

To enroll in the FBMC Dependent Care FSA, please elect an amount in ACORN, complete an FBMC enrollment form and return the enrollment form to Personnel before October 5, 2012.

PPEO Cafeteria Plan

New to Open Enrollment 2013 for Placer Public Employee's Organization (PPEO) Employees!!

Effective December 15, 2012 (pay date January 11, 2013) Placer County will contribute for each PPEO represented employee the following funds for use in a cafeteria plan:

- CalPERS Miscellaneous Members 6% bi-weekly contribution of the employees base salary plus longevity
- CalPERS Safety Members 5% bi-weekly contribution of the employees base salary plus longevity

Employees may elect to use Cafeteria Plan funds for Dependent Care reimbursement, 401(k) contribution, a cash option or any combination of these three.

Dependent Care Reimbursement – This option allows you to pay for part of your dependent care expenses using pretax dollars. Expenses, whether for a child or an elder, include any expense that allows you to work outside the home, including day care services, in-home care, nursery, preschool and summer day camps. It does not, however, cover medical expenses.

Cafeteria Plan 401(k) — The deferred compensation program is offered through Hartford and CalPERS. These plans allow you to set aside additional money for retirement on a pre-tax basis. You are required to select a percentage of your cafeteria plan funds for this option.

Cash Option – Selecting the Cash Option will allow you to receive your Cafeteria Plan money in your bi-weekly paycheck. However, this amount is considered taxable income and appropriate payroll taxes will be deducted.

Plan Highlights:

- If an election is not made during open enrollment, the default will be the cash option.
- If the cash option is selected, appropriate payroll taxes will be deducted.
- Funds are prorated for part time employees based on scheduled hours as identified in the ACORN payroll system.
- Changes to the plan can be made annually during open enrollment or if there is a qualifying life event (birth, death, divorce, etc). Please see Page 9.
- This compensation is not PERSable income.
- If the Cafeteria Plan 401(k) option is selected, employee must designate the same vendor (CalPERS or Hartford) for the Cafeteria Plan benefit as they have selected for their regular employee 401(k) contribution. For example, if you currently contribute to the CalPERS 401(k) for your regular employee contribution, you must select CalPERS 401(k) for your Cafeteria Plan benefit as well.

Deferred Compensation

Placer County offers voluntary deferred compensation programs under IRS Code 457 and 401(k) through Hartford and CalPERS. These plans allow you to set aside additional money for retirement on a pre-tax basis. You can enroll in and make changes to these plans at any time. IRS limits are subject to change in 2013.

County's \$130 per pay period contribution in your maximum yearly contribution amount.

Please Note: If you are participating in

the 401(k) In Lieu of

Health contribution, you must factor in the

2012 Plan Year 401(k) and 457 Minimum Contribution: \$10 per pay period (\$260 per year)

2012 Plan Year 401(k) and 457 Maximum Contribution: \$653.84 per pay period (\$17,000 per year)

If you are over age 50, you can contribute an additional "catch-up" amount of \$5,500 to your 401(k) and 457 plans, for a total contribution of \$22,500 per plan.

The Hartford and CalPERS 457 plans also have a three (3) year pre-retirement "catch-up" feature which allows you to 'make up' for years you did not contribute the maximum amount allowed.

The 457 three year pre-retirement catch-up cannot be used with the age 50+ pre-retirement catch-up.

401(k) and 457 Comparisons

401(k)

- ✓ Loan provision
- ✓ 10% tax penalty for 'early withdrawal' before age 59½ (in addition to ordinary income tax)

CalPERS

Kevin Howard/Doug Lytton 888-713-8244

www.CalPERS.ca.gov

457

- ✓ No loan provision
- ✓ No age restrictions or penalty once separated

Hartford

Jason Hughes 888.811.4839

www.HartfordLife.com

Concern: EAP

Employee Assistance Program

Placer County has partnered with Concern:EAP, a national Employee Assistance Program (EAP) that provides free and confidential information, referrals and short-term counseling for personal issues affecting work or personal life.

Concern:EAP services are available for permanent employees who work 20 hours per week or more, as well as their spouse, dependent children under age 23 or any age if incapable of self-sustaining employment due to mental or physical disability.

Short-Term Counseling

Concern:EAP offers free, confidential counseling and work/life resources to you and your family for most personal issues, including:

- Marital and family problems
- Job stress
- Parent/child conflicts
- Anxiety and depression
- Alcohol or drug problems
- · Loss and death

Eldercare Resources

If you are caring for an elderly person and want to learn more, consider talking to one of CONCERN's professional eldercare specialists. They can help you:

- · Clarify and prioritize problems
- Develop a problem solving plan
- Identify resources within your community
- Evaluate financial circumstances and review insurance options
- Find, arrange, and coordinate services
- Understand 'Advanced Directives' such as durable power of attorney for health care

Parenting and Childcare Resources

Concern:EAP can refer you to a wide variety of childcare resources, including:

- Before/after school care
- Infant centers and preschools
- In-home childcare
- 24 hour care
- Emergency drop-in care
- Care for sick children
- Adoption assistance
- College assistance
- Family day care centers

Concern: EAP

Financial Consultations

Concern:EAP provides a free 30-60 minute confidential financial consultation to you and your family. Some of the financial issues that Concern:EAP can help you with include:

- Buying a home
- Debt reduction strategies
- · Cash management
- · College planning
- Consumer credit services
- Foreclosures
- Income taxes
- Investment basics

Legal Consultations

Referrals are available for legal issues as well. You will be linked to a local attorney for a free 30-minute office or telephone consultation; any additional legal services are discounted 25% off regular hourly fees. The legal referral service can be used for all types of legal matters (excluding claims involving workplace issues):

- Adoption
- Bankruptcy
- Child custody
- Child support
- Contract disputes
- Consumer protection
- Credit problems
- Divorce

- Estate planning
- Foreclosures
- Identity Theft
- Immigration
- Income tax
- Landlord/tenant
- · Personal injury
- Probate
- Real estate
- Repossessions
- Traffic accidents

All attorneys on CONCERN's referral list have practiced law for at least five years, are licensed in the state of California and are members in good standing of the California State Bar Association.

Concern:EAP eldercare consultation and referral services are free of charge to eligible employees and their family; however employees are responsible for fees associated with the actual services selected.

To get more information about Concern:EAP, schedule an appointment, or for immediate help, call Concern:EAP at 1.800.344.4222 or visit their website at www.concern-eap.com.

Troubleshooting

Help! Trouble-shooting in ACORN

Having problems with Open Enrollment in ACORN? Here's some common issues answered.

Problem: I don't know how to find ACORN.

Solution: Open Internet Explorer, delete the website address in the address window and type in 'acorn'

(minus the quotes) and press enter. You can also get to ACORN from the main iPlacer page.

Problem: My shortcut to ACORN does not work.

Solution: Delete the old ACORN shortcut link, then open ACORN (see above for opening ACORN) and add the

ACORN page to your favorites. To add a new ACORN shortcut, contact your department's IT liaison.

Problem: I am prompted for a user ID and/or password when trying to access ACORN.

Solution: Email the ACORN help desk at ACORNhelp@placer.ca.gov for assistance.

Problem: I don't use ACORN very often, and don't know where to go once I'm logged in.

Solution: Once you're logged in to ACORN, select 'Main Menu', then 'Self Service', then 'Benefits', then

'Benefits Enrollment.'

Problem: Acorn is showing dependents I have removed.

Solution: For history purposes, ACORN shows dependents who were previously covered under your insurance.

However only the dependents that have a check box next to 'enroll' are currently covered under

your plan.

Problem: I made changes in ACORN, but when I went back in and looked at my benefits,

my changes aren't showing.

Solution: Your changes will not appear in ACORN until AFTER Open Enrollment closes on October 5th.

Payroll Calendar

#	PAY PERIOD	PAY DATE	HEALTH/LTD				
FISCAL YEAR 2012 - 2013			FIS		SCAL YEAR 2013	SCAL YEAR 2013 - 2014	
I	Jun 16 - Jun 29	July 13, 2012	August-12	I		Jun 15 - Jun 28	Jun 15 - Jun 28 July 12, 2013
2	Jun 30 - Jul 13	July 27, 2012	August-12	2		Jun 29 - Jul 12	Jun 29 - Jul 12 July 26, 2013
3	Jul 14 - Jul 27	August 10, 2012	September-12	3	1	Jul 13 - Jul 26	Jul 13 - Jul 26 August 9, 2013
4	Jul 28 - Aug 10	August 24, 2012	September-12	4		Jul 27 - Aug 09	Jul 27 - Aug 09 August 23, 2013
5	Aug II - Aug 24	September 7, 2012	October-12	5	A	Aug 10 - Aug 23	Aug 10 - Aug 23 September 6, 2013
6	Aug 25 - Sep 07	September 21, 2012	October-12	6	Αι	ıg 24 - Sep 06	ug 24 - Sep 06 September 20, 2013
7	Sep 08 - Sep 21	October 5, 2012	November-12	7	Se	p 07 - Sep 20	p 07 - Sep 20 October 4, 2013
8	Sep 22 - Oct 05	October 19, 2012	November-12	8	Sep 2	I - Oct 04	I - Oct 04 October 18, 2013
9	Oct 06 - Oct 19	November 2, 2012	December-12	9	Oct 05 -	Oct 18	Oct 18 November 1, 2013
10	Oct 20 - Nov 02	November 16, 2012	December-12	10	Oct 19 - Nov	01	01 November 15, 2013
П	Nov 03 - Nov 16	November 30, 2012	Free Pay Period	11	Nov 02 - Nov 1	5	5 November 29, 2013
12	Nov 17 - Nov 30	December 14, 2012	January-13	12	Nov 16 - Nov 29)	December 13, 2013
13	Dec 01 - Dec 14	December 28, 2012	January-13	13	Nov 30 - Dec 13	}	December 27, 2013
CA	LENDAR YEAR	2013		CA	LENDAR YEAR	-	2014
14	Dec 15 - Dec 28	January 11, 2013	February-13	14	Dec 14 - Dec 27		January 10, 2014
15	Dec 29 - Jan II	January 25, 2013	February-13	15	Dec 28 - Jan 10		January 24, 2014
16	Jan 12 - Jan 25	February 8, 2013	March-13	16	Jan II - Jan 24		February 7, 2014
17	Jan 26 - Feb 08	February 22, 2013	March-13	17	Jan 25 - Feb 07		February 21, 2014
18	Feb 09 - Feb 22	March 8, 2013	April-13	18	Feb 08 - Feb 21		March 7, 2014
19	Feb 23 - Mar 08	March 22, 2013	April-13	19	Feb 22 - Mar 07		March 21, 2013
20	Mar 09 - Mar 22	April 5, 2013	May-13	20	Mar 08 - Mar 21		April 4, 2013
21	Mar 23 - Apr 05	April 19, 2013	May-13	21	Mar 22 - Apr 04		April 18, 2013
22	Apr 06 - Apr 19	May 3, 2013	June-13	22	Apr 05 - Apr 18		May 2, 2014
23	Apr 20 - May 03	May 17, 2013	June-13	23	Apr 19 - May 02		May 16, 2014
24	May 04 - May 17	May 31, 2013	Free Pay Period	24	May 03 - May 16		May 30, 2014
25	May 18 - May 31	June 14, 2013	July-13	25	May 17 - May 30		June 13, 2014
26	Jun I - Jun 14	June 28, 2013	July-13	26	May 31 - Jun 13		June 27, 2014

Health Insurance Portability & Accountability Act (HIPAA)

The Health Insurance Portability & Accountability Act of 1996 (HIPAA), imposes requirements on health plans concerning the use and disclosure of personal medical information, also known as Protected Health Information. All CalPERS health plans are committed to protecting the privacy of the health information maintained by both CalPERS and by outside vendors who perform services for the plan.

CalPERS health plans may use and share your Protected Health Information for the purposes of treatment, payment, and health care operations and for certain other legally permitted purposes. Under no circumstances will any of our health plans disclose your health information to Placer County for the purpose of employment-related actions or decisions.

For more information regarding your rights and CalPERS health plan's legal duties under HIPAA, refer to the Evidence of Coverage (EOC) booklet on your plan's website, or CalPERS online at www.CalPERS.ca.gov.

Current Provider Information

NAME OF PROVIDER	COVERAGE PROVIDED	PHONE NUMBER	WEB ADDRESS/LINK	GROUP OR ID #
BLUE SHIELD NET VALUE	HMO Medical	800-334-5847	www.blueshieldca.com	PHO 01040
BLUE SHIELD ACCESS +	HMO Medical	888-334-5487	www.blueshieldca.com	PH0001 SS#
KAISER PERMANENTE	HMO Medical	800-464-4000	www.kaiserpermanente.org	00003-20 SS#
PERS SELECT	PPO Medical	877-737-7776	www.CalPERS.ca.gov	PER-0111-SEL SS#
PERSCARE	PPO Medical	877-737-7776	www.CalPERS.ca.gov Select 'For Members' Then 'Health Benefits Program'	KB050A SS#
PERS CHOICE	PPO Medical	877-737-7776	www.CalPERS.ca.gov 877-737-7776 Select 'For Members' Then 'Health Benefits Program'	
PORAC	PPO Medical	800-288-6928	www.porac.org	336684 SS#
DELTA DENTAL	Dental	800-765-6003	www.deltadentalins.com	1985 SS#
VISION SERVICE PLAN (VSP)	Vision	800-877-7195	www.vsp.com	12168909 SS#
CALPERS 401(K) & 457 KEVIN HOWARD DOUG LYTTON	Deferred Compensation	888-713-8244 800-260-0659	www.CalPERS.ca.gov then select: CalPERS Investments	SS#
HARTFORD 401(K) & 457 JASON HUGHES	Deferred Compensation	888-811-4839	www.hartfordlife.com	SS#
LINCOLN FINANCIAL GROUP	Long Term Disability	800-423-2765	www.jpfic.com	01-001664 SS#
CALPERS	Retirement	888-225-7377	www.CalPERS.ca.gov	
FBMC	Dependent Care, Flexible Spending Account	800-342-8017	www.myfbmc.com	SS#
CONCERN: EAP	Employee Assistance Program	800-344-4222	www.concern-eap.com	Placer

Notes				

The benefit plan information in this Employee Benefits Information and Open Enrollment Guide is meant only as a summary of benefits. This information does not fully describe your benefit coverage. For additional details on benefit coverage, please refer to the Evidence of Coverage booklet on your plan's website, or CalPERS online at www.CalPERS.ca.gov.